

Am. Essay on Calomel



This article, of the materia medica, as possessing, in an eminent degree, the various active properties of the multiplied preparations of the mineral, from which it is obtained, has been chosen as the base of a superstructure, which, it is intended, shall consist of remarks, at least, in some degree, applicable to all its kindred preparations.

It seems now to be decided by the Chemistry, that calomel is a subminate of the black oxide of Mercury, and is not, as formerly supposed, a simple subminate. It is not my intention to detail the process by which it is obtained, nor its history, but I may add, that this, like every other active article of medicine, met with much opposition to its adoption into general practice. But at this day, such has been the change of popular opinions, that no one article is in more common use, either in domestic or regular practice, and may I not say, to an injurious extent? for in many families, & with many physicians too, such is the degree to which this indiscriminate use of the medicine has obtained, that scarcely a finger can be pained, but calomel must be given. Such want of discrimination & judgment, in its exhibition, is to be lamented, for two important reasons.

1st The mischief immediately consequent to such indiscretion, has been

and attending to reform confidence in the medicine, when properly administered. It is ever important, that an article, professing such active virtues, should maintain its due credit. For confessedly, the *Lancet* & *Opium*, scarcely excepted, the *materia medica* does not furnish an article of rival powers. Very justly, has it been styled, the Sampson of the *m. medica*, by him, the effulgent beams of whose genius, have shed a lustre on the philosophy of medical sciences, equalled only by the brilliant blaze of a noonday sun. To this distinguished gentleman is due, in no little degree, the credit of reticating it from the chains of empiricism, and establishing earnest principles regarding its application to diseases. He first taught, that ten + ten, or ten + twenty, was not, as it has been sarcastically called, ad on for a horse.

What shall be said of the *modus operandi* of this medicine? It scarcely can be expected, that, in an essay limited, as this must necessarily be, an intimate investigation of this subject, shall be undertaken. Were the writer equal to the task, as necessarily involving all the laws of etiology, it would become too voluminous. Nevertheless, while he begs an exemption from the task, he is disposed to offer, a few aversary remarks, on this professedly dark part of medical sciences. It is well known that from the very dawn of medical sciences in the days of Hippocrates

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To the present illumined days numerous hypotheses have been framed for the solution of this problem. Of these, many have obtained a temporary empire, but have all finally yielded to successors, for the most part, not less gratuitous. It would seem, that the imagination, that inventive faculty of the human ^{mind}, so soon as the understanding perceives the absurdity of a prevailing theory, eagerly embraces what first presents a more comely and imposing form. Thus the aspect of the judgment, is, not unfrequently, obtained, and prejudices established, before its merits are tried by the tests of truth. Thus fixed, a search for truth is undertaken, not that the mind may be disentangled, and extricated, from the intricate mazes of hypothetical visions, but, to obtain for the visionary favorite, a more imposing mask, be the contortion of truth what it may. Were it not so, why should we hear such very opposite reports, from experiments, made in every other respect, under similar circumstances? The answer is easy, that which should have been the superstructure, has been placed, where should have been, the basis, and vice versa. Instead of the theories, if they can justly claim the title, being framed upon the solid base of a chain of well established experimental facts, these have been sought, only as supports to castles framed in the imagination.

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Thus, while we are told, from the experiments of our set, that the introduction of the bland fluids, ^{into the stomach,} will necessarily cause a train of Vagarious, if not fatal symptoms; from another it is reported, that Croatica Sator, may be introduced into the same vessels, without any mischievous results; only, causing emetic effects, as if taken into the stomach, but requiring a smaller dose. What is not a little astonishing, these opposite opinions, are advocated by authorities, equally entitled to credit. What then shall we say of such conflicting statements? Charity would lead us to suppose, what has been hinted, that from the influence of preconceived opinions, whether derived from education, or ill directed reflections of the mind itself, a barrier has been formed against the evidence of truth. The vulgar adage, "aman convinced against his will, is of the same opinion still," may aptly and ^{with} much propriety be applied to minds thus fettered with prejudices. But, I would not be understood, as intending to detract from the moral good intention of the parties. I suppose, it will not be denied, that the mind, will readily yield evidence to the evidence of a fact, it is anxious should exist, while more forcibly ^{evidence} will not obtain assent to a fact, the mind is disinclined to. Hence, we may fairly learn, that it is unsafe to yield implicit confidence in the opinions of any man, or set of men, which shall be the

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offspring of a favorable ^{theory} ~~unhappy~~ it be farther supported by strong corroborating testimony. Genuine scepticism, either in morals or medicine, I am not disposed to encourage, but I would say, that a formation ascribed to evidence, improperly presented to the mind, may, and will, impede the advances to correct notions and principles, and consequently, practice, in such. So many of these products of speculation, all displaying much ingenuity and profundity of intellect, but too much like the nebulous forms seen in midnight visions, its beautiful adorn no solid structure. A fair specimen of this is presented to us, in the elements of medicine. During the reign of this hypothesis, all was excitement & excitability, Adrenia & Asthenia, Diatheses. But these days have passed away, and have been succeeded by the halcyon days of Sympathy, under whose auspicious auspices, I have been favored with an ingress to the temple of medical science. This much favored theory, is exhibited in an exceedingly imposing form, and is supported by many of the brightest luminaries, that have illumined the sciences of medicine, but like its predecessors, its grasp is too expansive. It is made a universal solvent. No force of attraction between particles of differentities, being sufficient to resist its very active solvent power. Thus it is said, by sympathy, conception obtaining, the embryo is formed, the foetus is perfect.

ed, and finally, by sympathy, ushered into light. By sympathy its nutrient fluid is elaborated, & so on, even to death, in inducing which, sympathy is yet active. But before I take leave of sympathy, I must say that to me, it seems life exceptional, than any that have gone before.

The question yet remains, how can we account for the operation of a gent in the system? In prosecuting this enquiry, it may be well to consider, ^{what} further necessary to constitute action. Two things are important; a power, proper of some principle, property, or susceptibility, of action, and an exciting agent. The organized system may be considered as the power, possessing a certain susceptibility of receiving impressions, which may be called, excitability, irritability, sensorial power, or if any may prefer the term, vital principle. Thus constituted, it is fitted to exhibit, the phenomena of vital action, when acted on by any agent, the impress of which it is susceptible. No one visible phenomena of vital action, can exist, independent of exciting agent. From this it may be inferred, that I consider life, a force state. Not, strictly, so; I would say, that active & visible life is, but that this peculiar susceptibility, alluded to above, may exist in the organized system, under some circumstances, totally independent of all stimulus, by their mysterious union, exhibit some properties, essentially differing, from all mechanical or chemical actions.

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But to return, more particularly to the subject, much has of late been
said, of the relative action, between the system and medicines, and by
our gentleman, more particularly, it has been asserted, and supported with
much ability, that as all medicines are in themselves inert, it follows,
as a consequence, that the system must alone, be the active agent. The
old aphorism, "Medicamenta non agunt in cadaveris," must be admitted
and yet it would appear, from my views of vital action, that the sys-
tem, alone, will be found equally inactive. Consider, for example, respira-
tion. We know that the air in itself, cannot produce the phenomena
of respiration, yet, we shall find, that it is essentially, and absolutely neces-
sary, for that process. For exclude the air, and it immediately ceases. If
then, both are equally necessary to constitute the phenomena, how can
it be said, that it is the action of the one or the other? Would it not, rather
seem to be the effect of their conjoined action? And again, from
the analogy with chemical action, this opinion may receive additional
support. Take for instance, the action of sulphuric acid and barytes.
It will shew, that if sulphuric acid be added to any solution of
barytes, ~~the~~ the acid immediately combines with the earth, and in this case,
it may seem, that the oxide is the active article; but if the barytes be
added to any solution containing the acid, let it be combined with what

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it may, they again immediately unite. There is so much poverty in considering the earth, the active agent in this last case, or the acids in the first. In both cases, the effects result from their mutual affinity for each other and consequently mutual action. I am nevertheless aware of the difficulty, of explaining the actions of living matters upon chemical or mechanical principles; yet they are not to be entirely disclaimed. For, as a means of illustration, they may furnish a clue, by which we ^{may} arrive at important deductions. Indeed, it cannot be denied, that many chemical and mechanical actions, do take place in the living ^{system}, as in respiration and muscular action. Whether medicine acts the circulation, & in that way proves the cause of action, or only by an action on the part, to which it is applied, and extended by sympathy, and nervous influence, shall not repay to determine. It may be that they occasionally act in both ways.

I shall not carry him, to speak of the various remedial properties, of calomel but occasionally advert to them, when considering its application in the management of diseases. And first, of its use in Hepatitis. This disease in the commencement, is marked by the usual symptoms of active inflammation, requiring the common debilitating remedies as rest, cathartics, & cupping. At this stage of the complaint, calomel though

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be given liberally, as a cathartic, and its action aided by Salap, or the neutral salts. After active depletion, much benefit will be derived from a blister over the affected part. The specific action of calomel on the hepatic system, seems now to be so generally admitted, that it would appear, scarcely necessary, to add to the already accumulated mass of evidence. But, as winning this in a very striking manner, it may not be amiss to subjoin a few remarks contained in a communication to the writer, from Dr. Sully of Va. When speaking of this article, he says, "I have found the medicine when exhibited in a particular mode, to have what I should call, a specific operation. Under some circumstances, manifesting this property, in a more particular manner, than in the general, I have known considerable pain experienced. Soon after its exhibition, immediately in the substance of the liver; and that too, before any constitutional effects could have resulted from its power." On an abatement of the inflammatory symptoms, most generally about the 5th or 6th day, it becomes necessary to make some mercurial impression on the system. This may be done, by administering small doses of calomel. If much inflammatory action remain, it will be proper, to suffer the calomel to operate on the bowels. In some cases, it will be necessary to restrain it

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by combining opium; and in many cases, it will be proper to call to its aid, friction with the blue ointment. This will be best, if applied over the region of the liver. It will seldom be necessary to urge the mercurial ointment to much extent, and in most cases a gentle touch of the quins will prove sufficient. After the subsidence of the mercurial action, the system may be restored by tonics. This plan of treatment is also peculiarly adapted to the chronic form of this disease.

In Europe, this medicine has been much extolled; and particularly by H. Hamilton of Edinburgh. So great was his confidence in it, that he relied almost exclusively on it. Dr. Rush has also spoken in its praise. But with the distinguished professor of the institute and practice of medicine in our school, I must say, that I am not, at all, inclined to ~~exchange~~ the lancet, ^{but} emetics, ~~for~~ this, or any set of remedies, which have been as yet suggested. In the early stage, after an emetic, it may be given to discharge the bowels. But it is in the advanced stage, in which its best effects are obtained. Here it should be given, in divided doses, so as to produce some possible, and lasting action on the bowels. ~~Substituted~~ in this way, it will be found very beneficial, in removing the lingering remains of disease, and raising the susceptibility of the system to healthy action.

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In spasm of the cornea resulting, more particularly from inflammation consequent to external injuries of that membrane, Dr Physick has found, a course of calomel completely successful, in many cases. Occasionally it has been necessary to keep the system under its influence for some time. If I mistake not, the West does not found it necessary to use it to a pythiasis.

In pneumonic inflammation, under some circumstances, calomel may be administered with very happy results. Speaking of this affection in a stage somewhat advanced, says Dr Chapman, it often happens that we have a dry cough, tightness of the chest, and difficult respiration. In such cases, small doses of calomel, with Opium and Sperry, may be given at stated intervals, with much advantage. If the symptoms prove obstinate, it may be urged so as to produce some salivation of feet; and in this way, it will prevent Phthisis, hydrothorax and other bad consequences. In the bilious form of this disease, calomel will be farther necessary & cathartic in the early stage.

In pulmonary consumption consequent to ill cured catarrhs and pleurisy, calomel may be had recourse to, with advantage. Its exhibition is to be regulated pretty much as in pneumonic inflammation. It will probably be best here, to combine it with Squills, with occasional

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doses of opium, to allay irritation and procure rest. A pill, composed of ʒss of calomel to ʒjss of squills or ʒjss each, according to circumstances, may be given 2, 3, or 4 times a day, as the case may require. It may also, occasionally be useful to combine it with Regitalis. It will in most cases, be sufficient to obtain a moderate charge of the system, and keep it up until the symptoms yield. Whether this practice is ever proper, in tubercular consumption, seems exceedingly problematical. In most cases, there can be little doubt, that it would hasten a fatal issue.

In hyothonax Calomel combined with squills or Regitalis, as above, has been much celebrated, and yet maintaining its ground. In inflammatory cases, it will be proper to prescribe evacuations by vs. & cupping, previous to the use of the medicine. This thing with free bleeding, is mostly to be relied on for a cure. The combination with squills seems to be preferred, and may be exhibited as above directed. In the atonic form this course, is still more proper.

In ascites, after vs. free purging, & saline bladders, according to circumstances, the calomel and squills, with blisters will constitute the best remedial course. Here the mercurial action is more essentially required, so this form of therapy is, most commonly, the result

of some vesical obstruction. In many chronic cases, especially such as are the offspring of intemperance in the use of ardent liquors it will be necessary at the same times to combine a tonic course; for this purpose, a decoction of Gentian with the addition of a portion of super-carb. potash, will be found admirably calculated. The treatment, so peculiarly adapted to the management of those threatened of febrile, which are sometimes met with in that disordered state of the female system, usually called Green Sickness. But the previous use of purges should not be overlooked. In simple anacras, except as a purgative, calomel will seldom be necessary.

As to the use of calomel in Hydrocephalus internus, much discrepancy of opinion has obtained among practitioners. In the acute stage, if given otherwise than as a cathartic, it must prove mischievous. But, in the advanced stage, it may be given, so as to excite the absorbent system. As to the use of calomel in Scrophulous, there has been not a little difference in the opinions of medical characters. In the acute stage of the disease, it is acknowledged as the best purgative. But in the advanced stage, says Dr. Chapman, small doses combined with nuxetics or tuncas, ~~as indicated~~ may be prescribed with advantages in reducing induration or discharging tumors. Its alterative effect

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alone, should be obtained, and this continuing, for several weeks, as the case may require.

In obstinate Spasmodic or bilious colics, calomel combined with opium, is inferior to no remedial article. I have seen a pile, composed of ten grains of calomel, with 2 grs of opium, given every 1 or 2 hours, with the most happy result. This remedy is peculiarly adapted to cases, in which the stomach is irritable. In bilious cases, when protracted, it may become proper to make some mercurial action on the system.

In Colica pituitum, calomel, as a cathartic, is equally proper. At this day, it seems pretty well settled, that, to obtain a radical cure in this disease, the system should be soon as possible put under the influence of the mercurial action. For this purpose, calomel, in small and repeated doses, should be early resorted to.

In constipation, calomel is prescribed both as a purgative and alterative. Says Dr. Hosack, when ordinary means fail, I give calomel in divided doses, till the gums are affected. A very respectable practitioner, Mr. Studley of Va., in a communication to the writer, says, "I have known a case to occur, where the patient, laboring under habitual Torpor of the whole

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alimentary canal, accompanied with extreme constipation and induration of the faeces, would ^{have} an immediate Sympathetic action, exerted throughout the whole extent of that canal, so as sometimes to produce discharges of Stools, and not infrequently of wind, unaccompanied by faecal evacuations. In protracted cases of constipation, may not the good effects of Calomel, be referred to its action on the liver?

In obstinate cases of Dyspepsia, which are generally connected with some vesical obstruction, as the Liver often is, Calomel, variously combined, has been prescribed, and often with good effects. Under similar circumstances, in chronic diarrhoea, as a sericus recti, it has not infrequently, proved highly beneficial.

In Dysentery, particularly of Southern latitudes, Calomel had long been much extolled. I have in this disease, seen it given variously combined; but I think it is best combined, with opium, & its purgative action, when necessary, aided byenna or oil. A powder or pill containing 10 or 15 grs of Cal: + 1 or 2 grs of opium, given at bedtime, will in very many cases, allay pain, procure rest, and if aided in the morning by some laxative, procure free evacuation. This disease is generally accompanied, with hepatic enlargement, and

the intestines are harassed by the acid fluids discharged from the liver. When the disease is protracted from this cause, or from the peculiar action of the intestines themselves, it will be more readily subdued by a mercurial impression, than any remedy that can be administered.

In cholera morbus, in which there is likewise much disengagement in the biliary actions, calomel is not less important.

In enteritis, as being less irritating to an inflamed surface, calomel is to be preferred to all other articles of its class.

In most cases of jaundice, calomel is indispensable and this more particularly, when the symptoms are dependent upon a torpid action of the liver.

In intermittents calomel has been much celebrated. In the acute or early stages it is used only as a cathartic. In the protracted stage, when the disease is generally kept up by the force of habit, or from visceral obstructions, nothing can be relied on, except a strong mercurial impression. Keeping up an affection of the gums for a week or two will generally be sufficient. This may be aided by four blistering.

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climate, calomel is an invaluable article. This fever is generally
 ushered in, with symptoms of much gastric and hepatic derange-
 ment. I am disposed to think that the morbid cause exerts
 its main force, on the liver. In many cases, the secretion from the
 liver, seems to be simply increased in quantity, and again kept
 by stasis.

This disease, should be first attacked by bloodletting, emetics
 & cathartics. As a cathartic, calomel seems to be, universally preferred.
 It may be advantageously combined with Jalap, sassa, &c. The dose
 should be large, not less than 40 or 50 grs. I have known a physician,
 who was in the habit of prescribing it, in doses of from 50 to 80 grains
 His practice was successful, but I can see no need of such gigan-
 tic doses. Calomel, more than any purgative with which I am ac-
 quainted, cleanses the bile-ducts, and frees the bowels, from redundant
 bile. If suffered to remain awhile in the system, before purged off,
 it may be productive of farther good effects, in altering the action of the
 liver, and so far, weaken the force of the disease. With this view, the
 medicine may be administered the ^{night} ~~day~~, in a dose not sufficient to
 purge itself off, before morning, when, if necessary, its operation may be
 assisted by appropriate means. Should these means, not obtain a solution

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of the disease, it may be given, either in the form of Dr. Keck's an-
 timonial powder, or alone, alternated with some refrigerant mixture.
 It should be so regulated, as to keep up a gentle catharsis, at this stage
 of the treatment. But, a little more advanced, it will become more de-
 sirable to obtain some specific effect from the calomel. Exhibited
 in doses of one or two, 3 or 4 times a day, we shall often derive much
 benefit from it, before any mercurial ^{action} is otherwise evinced. From
 this I have been led to suspect that calomel, like Bart. antim., is pos-
 sessed, of some peculiar febrifuge virtue, not heretofore adverted
 to. This peculiar action, the writer has remarked, in cases of simple
 fever, unconnected with any apparent local affection. I have
 seen a case, of considerable febrile excitement, in which calomel has
 been exhibited as a cathartic, when every symptom has com-
 pletely subsided, before any action was otherwise evinced. I am also
 informed, by a lady of much discernment, that she had frequently
 remarked, that when her children have ^{been} attacked with fever, a
 dose of calomel has entirely removed the symptoms, before its purga-
 tive effects have been experienced. These effects have been too often
 deemed, to doubt of ~~their~~ being the effect of the medicine. I have only
 to report, that my attention has been too recently called to remark this.

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operation of the medicines, to permit me to say more fully favor. I can scarcely doubt, but that, if the subject was investigated with equal ability and industry, the febrile powers of calomel would be found equal, if not surpassing those of the antimonial medicine so much extolled, by Sir George Thodges. But in many cases the force of the disease is such, that it will require more potent impressions, for its subduition. In such cases, the medicine must be continued, till the gums announce its propeision of the system. If the symptoms do not readily yield, a moderate action should be continued, till they are subdued. This mode, of managing bilious fevers, I without hesitation assert, will, if well regulated, prove as successful as bark or arsenic in intermittents. I have seen the practice fairly tested, and in no one instance have I witnessed, or heard of a fatal issue, where the calomel had received a specific action. After the disease has been thus eradicated, a proper tonic course will speedily restore the patient to health.

The well known efficacy of calomel, as a cathartic, in yellow fever, will conclude the necessity of sitting on the subject here. When this is a peculiar and distinct form of morbid action, or only a higher and more aggravated grade of bilious fever, seems as yet

sub judicio, Should it be the latter, mercurial treatment will be a
 greatly necessary, as in its minor state.

Having been omitted in its proper place, it may be well to remark
 here, that calomel constitutes one of our best antiseptics. It may be
 given alone, or combined with rhubarb, jalap or gamboge. It is
 best to give it alone, and permit to remain several hours, before it is
 purged off.

I next pass on to say something of the late winter epidemic or
 acute typhus. I should feel, no little hesitation in attacking this
 me hydra headed, monster, were I not conscious of having seen him
 shorn of his ensigns of terror, vanquished and prostrated before the throne
 of medicine. Yes, even this morbid demon, which has borne the seeds
 of death spreading consternation and dismay, whenever it has raised
 its gigantic arm, may be humbled as a lamb to the pharos, and ren-
 dered as obedient to the empire of medicines as Squaw, when shorn of
 his locks of might, to the Philistines, whom his strength had awed.

In looking over the publications on this disease, I have been much
 disappointed, in finding nothing satisfactory, either as to the peculiar
 character, or treatment of it. I beg leave to make primarily on those
 presented to my observation in different parts of Virginia.

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From the character of the disease, as delineated by Dr. Chapman in his lectures, there would seem to be no very marked point of difference, between its appearance in Philadelphia, ¹⁸³⁴ But from the history, given by Dr. Davis of S. Carolina, it seems, there to ^{have} assumed a widely different character.

This disease was first subjected to my examination, during the winter 1814 & 15, while discharging a tour of military duty, near Richmond Va. Its approach was sudden, and ^{not} preceded by any premonitory signs, either in the type of the disease, or character of the season. It made its appearance first among those who had been most exposed to an insalubrious atmosphere, and especially the interior. It was very peculiarly marked by its violence and suddenness of attack, and not less by its rapid advances; for, unless speedy relief was afforded, it often ran its course, and terminated fatally, in 4, 5, 7 or 96 hours. It was usually ushered in with rigor and a chill, soon followed by great prostration of muscular strength, often accompanied with much pain, difficult respiration, &c. Connected with these symptoms, was for the most part, an enfeebled circulation, and some gastric disturb. It assumed various forms, sometimes attacking the throat; and also the chest the head & spine. The two leading forms, were those of the pneumonia and sanguine affections; and of these the former. As the disease advanced,

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a train of still more distressing symptomatic affections, such as coma, stupor & delirium, subvultus, strangling & finally death under the rapid & unmistakable disorder and helpless attitude many cases.

Dissections, after death from this disease, show the most evident marks of disease, in the thoracic and abdominal viscera. In one case, in which the disease seemed mostly seated in the brain, dissection disclosed no marks ^{inflammation} of that organ, or its membranes. In the few dissections which I have witnessed, there have been obvious marks of active inflammation, such as adhesions, effusions of lymph, formations of abscesses, &c. in the thorax. In the stomach and intestines, there have been, occasionally, traces of inflammation. In the liver there are still stronger marks of diseased action; such as induration and irritated secretion. I have seen the gall bladder turgid with a dark viscid substance, scarcely fluid, and exuding acid.

In contemplating this complaint we have to remark the very peculiar relation, which seems to subsist, between the action of cold and the cause of the disease. In what this relation consists, it will be difficult even to conjecture; but, of its existence, there can be no doubt. In many cases, occurring in the encampment, some undue exposure to cold, had preceded the attack. The weather

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becoming milder diminished the number of attacks, whereas, when colder never failed to enlarge the list of sick. Every person must have observed its coming with the winter, and receding as the spring advances.

When contemplating the treatment of ^{this} complaint, the first inquiry that presents itself is, whether this is a disease of increased or diminished action. There are, not wanting, advocates for both sides of the question.

I find that Mr. Ford, of Richmond, Va., has asserted it to be, as a question of much argumented action. And, ^{that} he attempts to support from his success with the active excretion. Now this may be, perhaps, I should not say but I must confess, that I have not before learnt, that this gentleman was more successful than others. From my observations, as to the result of medicine, the contrary would appear. What has misled most practitioners, have been the evident marks of inflammation; having been accustomed to connect this necessarily with increased action. This error has of late been corrected and it is now taught, by Doct. Physick, that inflammation is neither necessarily connected, with increased nor diminished, but is specific & attended action. Embracing these views of the subject, to me, the difficulty seems removed. I am very decided in the opinion,

that is a peculiar, and specific form of morbid action, as much differing from the disease, whose cause it may, as does the inflammation of lungs, from that excited by common causes.

In the pneumonic form, more particularly, some have been tempted to try the Linctus. Sarg. M^r. Palmer, an acute physician, of much experience in this disease, when speaking of this form, "has said the linctus affords the least relief from the most excruciating distress, as might have been expected." Dr. Chapman says, he has seldom or never used the linctus. Ever since the first remedy, from which much relief was obtained. Next occasional purgative dose of calomel, partial bleeding, and blisters. This was the utmost improvement in the treatment, while I remained in the army.

In the winter of 1815 & 16, in a somewhat more western part of the state, I had again an opportunity of entreprising the disease, in some of its malignant forms. At this time the disease seemed to have reached its acme. And, very happily for its victims, the improvement in its management, seemed to have kept pace. It was principally in the practice of Dr. Suckor, a gentleman of much enterprise and discrimination in the management of diseases, that I was favored with an opportunity of further testing the proper treat-

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ment in this malady. It was his practice to manage it with emetic mild cathartics, Elixirs, calomel, Eucaphorics and stimulents.

Called to a patient in the first, second or third day, unless clearly contraindicated, he immediately gave an active emetic, and promoted its operation by warm draughts; & should this not also move the bowels, some cathartic was given shortly after emetic effects had ceased. In an emetic, I have generally found the emetic tartar and Opacids to answer every purpose; the former the peculiar indication of the insensitibility of the stomach, a very augmented dose, will frequently be required to obtain a free emesis. Under such circumstances, Mr. Palmer tells me, he has resorted to the use of trophosphoric acid, and, to use his own words, "has had reason to be entirely satisfied with the result." He goes on to say, that experience has taught him, that mischief results, in case of much Tortion of the stomach, occasionally, from the medicine, and that it happens over into the intestines, & inducing by proctothrosis. This course being pursued, local affections, if any, will next claim attention. These must be treated by fine blistering, as near the affected part, as convenient. I have seen the whole chest encased by a blister, with most happy result. Most calomel is given, in divided doses, to mollify & speedily asphy-

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like a strong impression on the system. But, as there is generally an accumulation of fecal acid matter in the intestines, it will be proper, to administer it, so as to keep up a gentle cathartic. Now, three or more stools a day, according to the nature of the discharges and the strength of the patient. The matter discharged is often dark, exceedingly fetid and acid. The calomel may be given, in doses of one or two grains, every 2 or 3 hours, as may run best, and alternated with some cathartic, more or less stimulating. I have generally seen the camphorated powder, in an infusion of sweetgum answer very happily. When necessary, more potent cathartics may be called into requisition, such as the Bark & Sassafras, wine, Taday & volatile alkali.

Mr Palmer tells, he has been in the habit of prescribing the calomel, in a purgation dose, once in 4 or 5 hours. But so far as my experience & observation extends, no plan of treatment, with which I have been acquainted, in point of success, has equalled that I have laid down. I am willing to hazard the opinion, that if the success be attended in the early stages, this course of treatment will, if properly adapted to the varying state of the symptoms, be found equally successful with the proper treatment, in the intermitted or bilious fever. I have never witnessed a single case, in which the symptoms have refused

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to the colonel, when a forcible action has been banished by the month's quing. It will be seen, by those conversant with the disease, that the history I have given, is very imperfect. It has not been my intention to do more, than to delineate some of the more prominent features, either in its character or treatment. Whether I have succeeded or in this, others must decide.

Next I am to say something of, colonial with cure of chronic inflammation. Except while attending the practice of the Pennsylvania Hospital during the last season (1817 & 18), my observations in this disease have been exceedingly limited. During visits to this institution, I had frequent opportunity of witnessing complaint, in its most aggravated forms, & the marked agency of the mercurial action, in subduing all its symptoms. The victims of the disease were, for the most part, sailors, whose constitution had been crippled by age or rendered fragile by intemperance, exposure & various irregularity consequent to their avocation. The limited time of my attendance did not permit me to form an estimate of its radical effects. But in a few days past, I have received from Mr. M., a very satisfactory communication on this subject. His summary, I beg leave to subjoin.

"I have, say the word, been much more frequently disappointed this

season in the P. Hospital by the mercurial treatment of this disease that has ever happened to me before, since I adopted this practice. This failure I am enabled, from great experience, to ascribe, to its not being carried to the same extent in activity & duration, as has been my custom heretofore. This change has arisen, in part from the cases, generally speaking, being less painful and of shorter duration than in former years; but more especially from a desire to ascertain whether this disagreeable remedy might not prove effectual without the patient suffering so long, or so much as my former practice required. The result of the trial, this season, has completely convinced me, that if chronic inflammation has existed for several months running will generally fail to cure it, unless a saturation to a considerable extent is continued three or four weeks. When of shorter duration the disease will often return upon the cessation of the mercurial action. The practice of the Hospital last winter is no fair evidence of the virtue of the remedy. The result of my experience is, that every form of chronic inflammation, in almost every instance is removed, during the stygation, if it is carried to a considerable extent; that the exceptions are very few indeed, when there is not permanent relief obtained; and that in a vast majority of cases, a complete cure is

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affected, if the salivation has been continued actively three or
 four weeks. This disease is very apt to recur on exposure to the
 usual exciting causes. Some gentlemen to whom I have related my
 experience, have supposed, that as my patients have generally been
 sailors, that the cases have been venereal. This opinion however is
 without foundation. After stating the causes which concur to increase
 the liability of sailors to the disease, and under it more aggravated,
 he goes on to say "cures of similar cases, by the same remedy, are
 made in persons who have never had the venereal disease. There
 is this remarkable difference in the progress of recovery from pain
 in these two affections, & it is sufficient to designate their nature,
 In the venereal, they recede in proportion to the continuance of
 the salivation, in Rheumatism they suddenly cease, as soon as the mem-
 bers have complete resorption of the system." After saying something of the
 character of the patients, under it, in the P. Hospital, he says, "persons
 who have been crippled a year or two, then entirely disabled from
 work, have, by this remedy, been often restored to their former useful-
 ness. It is however not infallible. I have fairly tried quia cura in
 powder, and the volatile tincture, Worms powder, decoction of the
 woods, Sulphur, oil of turpentine, blisters, tincture of jalap, and

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other remedies in great quantities, and have continued them a long
 time; sometimes singly, and at other times variously combined, I have
 found each of them occasionally to cure. But I think mercury, when
 carried to the proper extent, more efficacious, than all these re-
 medies together. Altho I often rely solely on it yet when it is
 thought prudent not to salivate much, from the peculiar state of
 the constitution, I prescribe in addition, the compound decoction of
 Sarsaparilla, and blisters to the parts affected. When I employ
 the other remedies, above mentioned, I am much in the practice
 of assisting their operation, by the application of an epispaste to the
 pained part, and so beneficial does it prove, that it rarely
 happens, that I pass through the wards of the Hospital, that
 some one of the Patients does not request to have one. My gene-
 ral mode of producing salivation in chronic Rheumatism is,
 to give a grain and an half of Calomel, with half a grain of
 opium made into a pill, morning and night. In most instances,
 in about a week the mouth begins to be affected; the medi-
 cine is still continued, until I think a sufficient effect will
 be produced. When the mercury is omitted prematurely, there is
 sometimes more difficulty, in introducing the ptyalism, than there

and I will mention some interesting facts in relation to
the geological structure of the state and the general character
of the rocks which form its base. It is generally well known
that the rocks of the state are of three different classes
to wit the igneous, the sedimentary and the metamorphic.
The igneous rocks are of two kinds, the intrusive and the
extrusive. The intrusive rocks are those which have
crystallized from a molten state and have solidified
in the interior of the earth. The extrusive rocks are
those which have been ejected from the interior of the
earth and have solidified on the surface. The sedimentary
rocks are those which have been formed from the remains
of plants and animals which have been deposited in
layers and have been consolidated by the action of
time and pressure. The metamorphic rocks are those
which have been changed from one kind of rock into
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was in causing it in the first instance. In some cases, it has gradually ceased, altho' my patients have affirmed me, they have continued to take the same quantity, that made their mouths sore. When the stomach and bowels are irritable, I have substituted the blue pills, or used the mercurial ointment.

As to the use of Calomel in syphilis, much discrepancy of opinion yet obtains, and not a little controversy. I shall not attempt to wound the impetuosity of warfare from the combatants, nor settle the dispute; I am content that ^{they} may fight it out. To me, those who treat chancre as a local affection, deferring the exhibition of mercury till constitutive symptoms shew themselves, act most consonant with reason and experience.

Much has of late been said, of the diseases caused by mercury. That an agent, so pervading in its nature, is capable of producing serious derangement in the living ^{system}, can not be denied. I have seen mercury, very liberally used, but have never witnessed any of those dreadful effects, so much vociferated thro' the land. Nor am I inclined to admit, that they are ever, its necessary consequence. That these evils arise, from a want of proper discrimination, and judgment in adapting the medicine, to the

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state of the disease, and constitution of the patient, to me, seems to admit of little doubt. If mercury made cures, I should or forgive. I must have been a host, where, I have witnessed none.

It cannot be too forcibly impressed on the minds of physicians, or heads of families, to study the nature, and proper application of this remedy ~~and~~ disease. Let them consider, that all medicines are active by poisonous, as they are actively remedial, & so intimately are united, the bitter and the sweet, that good and evil would indeed, seem twin ^{by steps to} ~~steps~~. Let ~~them~~ ^{us} avoid the evil and seek the good. Many diseases may have been named, that have been overlooked, but time will not permit more to be said.

Philadelphia March 2nd 1819

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